

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE:

JUAN CARLOS COLON RIVERA

DEBTOR(S)

CASE NUMBER: 23-01017/MCF

CHAPTER 7

**DEBTOR'S MOTION CONCERNING AMENDMENT
TO SCHEDULE "E/F" OFFICIAL FORM 106E/F**

TO THE HONORABLE COURT:

COMES NOW, JUAN CARLOS COLON RIVERA, the Debtor through his undersigned attorney Counsel, and very respectfully states and prays as follows:

1. The Debtor hereby amends Schedule "E/F" to previously filed Schedule "E/F" docket no. 1, pursuant to Rule 1009 of the Federal Rules of Bankruptcy Procedure and local Bankruptcy Rule 1009-1, for the purpose of: **include priority claim, account no. xxx-xx-9670, from creditor Department of Treasury, PO Box 9024140, San Juan PR 00902-4140, in the sum of \$4,450.00.**

WHEREFORE, the Debtor prays that this Honorable Court take knowledge of said amendment and provide accordingly.

NOTICE

Within fourteen (14) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

CERTIFICATE OF SERVICE: I hereby certify that on this date I electronically filed the above document with the Clerk of the Court using the CM/ECF System which sends notification of such filing to all those who in this case have registered for receipt of notice by electronic mail, including the US Trustee's Office and the Trustee. I further certify that the foregoing has been served by depositing true and correct copies thereof in the United States Mail, postage prepaid, to none CM/ECF participants: Debtor to his address of record; to the creditor affected by the amendment: Department of Treasury, PO Box 9024140, San Juan PR 00902-4140; and creditors and parties in interest as per the attached master address list.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 11th day of May, 2023.

/s/Roberto Figueroa Carrasquillo
R FIGUEROA CARRASQUILLO LAW OFFICE PSC
USDC #203614
ATTORNEY for the DEBTOR
PO BOX 186
CAGUAS PR 00726
TEL. NO. (787) 744-7699/(787)963-7699
EMAIL: rfc@rfigueroalaw.com

Fill in this information to identify your case:

Debtor 1	JUAN CARLOS COLON RIVERA		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF PUERTO RICO, SAN JUAN DIVISION		
Case number (if known)	3:23-bk-1017		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.

Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	Departamento de Hacienda Priority Creditor's Name	Last 4 digits of account number 9670	\$4,450.00	\$4,450.00
	PO Box 9024140 San Juan, PR 00902-4140 Number Street City State Zip Code	When was the debt incurred?		\$0.00

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of PRIORITY unsecured claim:

Domestic support obligations

Taxes and certain other debts you owe the government

Claims for death or personal injury while you were intoxicated

Other. Specify _____

Tax Period 2022, 2021, 2020 and 2019

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor 1 COLON RIVERA, JUAN CARLOS

Case number (if known)

3:23-bk-1017

4.1	<u>Citibank NA</u> Nonpriority Creditor's Name <u>PO Box 790110</u> <u>St Louis, MO 63179-0110</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8532</u> When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>
4.2	<u>DTOP</u> Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9670</u> When was the debt incurred? <u>08/31/2022</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Ticket No. 1410716111</u>
4.3	<u>DTOP</u> Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9670</u> When was the debt incurred? <u>01/16/2022</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Ticket No 115536799</u>

Debtor 1 COLON RIVERA, JUAN CARLOS

Case number (if known)

3:23-bk-1017

4.4

DTOP

Nonpriority Creditor's Name

PO Box 41269

San Juan, PR 00940-1269

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

9670

\$15.00

When was the debt incurred?

01/09/2022

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Ticket No 115536798

4.5

DTOP

Nonpriority Creditor's Name

PO Box 41269

San Juan, PR 00940-1269

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

9670

\$15.00

When was the debt incurred?

11/30/2021

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Ticket No 112849099

4.6

DTOP

Nonpriority Creditor's Name

PO Box 41269

San Juan, PR 00940-1269

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

9670

\$15.00

When was the debt incurred?

10/31/2021

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Ticket No 111565003

Debtor 1 <u>COLON RIVERA, JUAN CARLOS</u>		Case number (if known)	<u>3:23-bk-1017</u>
4.7	<p><u>DTOP</u> Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u></p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p><u>9670</u></p> <p>When was the debt incurred?</p> <p><u>10/21/2021</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Ticket No 110813733</u></p>	\$15.00
4.8	<p><u>DTOP</u> Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u></p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p><u>9670</u></p> <p>When was the debt incurred?</p> <p><u>10/20/2021</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Ticket No 110813732</u></p>	\$15.00
4.9	<p><u>DTOP</u> Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u></p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p><u>9670</u></p> <p>When was the debt incurred?</p> <p><u>10/17/2021</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Ticket No 110673126</u></p>	\$15.00

Debtor 1	COLON RIVERA, JUAN CARLOS	Case number (if known)	3:23-bk-1017
4.10	DTOP Nonpriority Creditor's Name PO Box 41269 San Juan, PR 00940-1269 Number Street City State Zip Code	Last 4 digits of account number 9670 When was the debt incurred? 10/05/2021	\$15.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Ticket No 109809572 <input type="checkbox"/> Yes			
4.11	DTOP Nonpriority Creditor's Name PO Box 41269 San Juan, PR 00940-1269 Number Street City State Zip Code	Last 4 digits of account number 9670 When was the debt incurred? 10/04/2021	\$15.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Ticket No 109809571 <input type="checkbox"/> Yes			
4.12	DTOP Nonpriority Creditor's Name PO Box 41269 San Juan, PR 00940-1269 Number Street City State Zip Code	Last 4 digits of account number 9670 When was the debt incurred? 10/03/2021	\$15.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Ticket No 109809570 <input type="checkbox"/> Yes			

Debtor 1	<u>COLON RIVERA, JUAN CARLOS</u>		Case number (if known)	<u>3:23-bk-1017</u>
4.13	DTOP Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u> Number Street City State Zip Code	Last 4 digits of account number	<u>9670</u>	\$15.00
	When was the debt incurred?	<u>10/03/2021</u>		
	As of the date you file, the claim is: Check all that apply			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Ticket No 109809569</u>			
4.14	DTOP Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u> Number Street City State Zip Code	Last 4 digits of account number	<u>9670</u>	\$15.00
	When was the debt incurred?	<u>10/02/2021</u>		
	As of the date you file, the claim is: Check all that apply			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Ticket No 109809568</u>			
4.15	DTOP Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u> Number Street City State Zip Code	Last 4 digits of account number	<u>9670</u>	\$15.00
	When was the debt incurred?	<u>09/03/2021</u>		
	As of the date you file, the claim is: Check all that apply			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Disputed <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Ticket No 108085250</u>			

Debtor 1 COLON RIVERA, JUAN CARLOS

Case number (if known)

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4.16	DTOP Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u> Number Street City State Zip Code	Last 4 digits of account number <u>9670</u>	\$15.00
		When was the debt incurred? <u>09/01/2021</u>	

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Ticket No 107891839

4.17	DTOP Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u> Number Street City State Zip Code	Last 4 digits of account number <u>9670</u>	\$15.00
		When was the debt incurred? <u>07/13/2021</u>	

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Ticket No 107508201

4.18	DTOP Nonpriority Creditor's Name <u>PO Box 41269</u> <u>San Juan, PR 00940-1269</u> Number Street City State Zip Code	Last 4 digits of account number <u>9670</u>	\$15.00
		When was the debt incurred? <u>06/30/2021</u>	

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed
Type of NONPRIORITY unsecured claim:
 Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Ticket No 107508200

Debtor 1 **COLON RIVERA, JUAN CARLOS**

Case number (if known)

3:23-bk-10174.19 **Firstbank Puerto Rico** Last 4 digits of account number **3196** **\$25,000.00**

Nonpriority Creditor's Name

PO Box 11856**San Juan, PR 00910-3856**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

When was the debt incurred?

2021-06

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Auto Deficiency (2022 Mitsubishi Outlander)4.20 **Lcda. Arleen Y. Pabon Cruz** Last 4 digits of account number **0050** **\$100.00**

Nonpriority Creditor's Name

Cond Le Mans**602 Ave Munoz Rivera Oficina 501****San Juan, PR 00918**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify _____4.21 **Synccb/empresas Berrios** Last 4 digits of account number **2437** **\$2,146.00**

Nonpriority Creditor's Name

C/o**PO Box 965036****Orlando, FL 32896-5036**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

 No YesWhen was the debt incurred? **2019-01**

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify _____

Debtor 1	<u>COLON RIVERA, JUAN CARLOS</u>	Case number (if known)	<u>3:23-bk-1017</u>
4.22	<u>Syncb/Jc Penney Pr</u> Nonpriority Creditor's Name PO Box 965007 Orlando, FL 32896-5007 Number Street City State Zip Code	Last 4 digits of account number <u>0467</u> When was the debt incurred? <u>2018-08</u>	<u>\$764.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Credit Card</u> <input type="checkbox"/> Yes			
4.23	<u>Syncb/netwrk</u> Nonpriority Creditor's Name C/o PO Box 965036 Orlando, FL 32896-5036 Number Street City State Zip Code	Last 4 digits of account number <u>4058</u> When was the debt incurred? <u>2019-10</u>	<u>\$7,043.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Credit Card</u> <input type="checkbox"/> Yes			
4.24	<u>Syncb/pandora</u> Nonpriority Creditor's Name C/o PO Box 965036 Orlando, FL 32896-5036 Number Street City State Zip Code	Last 4 digits of account number <u>3756</u> When was the debt incurred? <u>2022-06</u>	<u>\$721.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Credit Card</u> <input type="checkbox"/> Yes			

Debtor 1 COLON RIVERA, JUAN CARLOS

Case number (if known) 3:23-bk-1017

4.25 Syncb/Sams Club Last 4 digits of account number 1153 \$856.00

Nonpriority Creditor's Name

PO Box 965005
Orlando, FL 32896-5005

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

1153

\$856.00

When was the debt incurred?

2014-03

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit Card

4.26 Syncb/tjx Cos Dc Last 4 digits of account number 6604 \$3,492.00

Nonpriority Creditor's Name

PO Box 71737

Philadelphia, PA 19019

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

6604

\$3,492.00

When was the debt incurred?

2020-06

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit Card

4.27 Syncb/Walmart Last 4 digits of account number 2948 \$426.00

Nonpriority Creditor's Name

PO Box 31293

Salt Lake City, UT 84131-0293

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Last 4 digits of account number

2948

\$426.00

When was the debt incurred?

2018-05

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit Card

4.28	Thd/Cbna Nonpriority Creditor's Name	Last 4 digits of account number 2905	\$1,306.00
PO Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zip Code		When was the debt incurred? 2018-08	
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Portfolio Recovery Associates, LLC
PO Box 12914
Norfolk, VA 23541-0914

Line **4.1** of (Check one):

-
- Part 1: Creditors with Priority Unsecured Claims
-
-
- Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

8532**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim
Total claims from Part 1	6a. Domestic support obligations	\$ 0.00
	6b. Taxes and certain other debts you owe the government	\$ 4,450.00
	6c. Claims for death or personal injury while you were intoxicated	\$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	\$ 0.00
	6e. Total Priority. Add lines 6a through 6d.	4,450.00
Total claims from Part 2	6f. Student loans	Total Claim \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	\$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	\$ 43,786.65
	6j. Total Nonpriority. Add lines 6f through 6i.	43,786.65

Fill in this information to identify your case:

Debtor 1	JUAN CARLOS COLON RIVERA		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF PUERTO RICO, SAN JUAN DIVISION		
Case number (if known)	<u>3:23-bk-1017</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

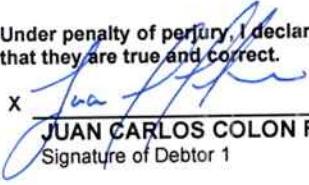
No

Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X


JUAN CARLOS COLON RIVERA
Signature of Debtor 1

Date May 11, 2023

X

Signature of Debtor 2

Date _____

Label Matrix for local noticing

0104-3

Case 23-01017-MCF7

District of Puerto Rico

Old San Juan

Thu May 11 11:48:09 AST 2023

US Bankruptcy Court District of P.R.
 Jose V Toledo Fed Bldg & US Courthouse
 300 Recinto Sur Street, Room 109
 San Juan, PR 00901-1964

BANCO POPULAR DE PUERTO RICO
 COLON SANTANA & ASOCIADOS CSP
 URB BALDRICH 315 COLL & TOSTE
 SAN JUAN, PR 00918-4026

ORIENTAL BANK
 PO BOX 79552
 SAN JUAN, PR 00984-9552

(p)ASOCIAACION DE EMPLEADOS DEL ELA
 ATTN IRITZA ORTIZ ECHEVARRIA
 PO BOX 364508
 SAN JUAN PR 00936-4508

BANCO POPULAR DE PR, BANKRUPTCY DEPARTMENT
 PO Box 362708, San Juan PR 00936-2708
 (787) 723-0077

Banco Popular de Puerto Rico
 Bankruptcy Department
 PO Box 366818
 San Juan, PR 00936-6818

Citibank NA
 PO Box 790110
 St Louis, MO 63179-0110

(p)DEPARTAMENTO DE TRANSPORTACION Y OBRAS PUB
 P O BOX 41269
 SAN JUAN PR 00940-1269

FIRSTBANK
 CONSUMER SERVICE CENTER
 BANKRUPTCY DIVISION-(CODE 248)
 PO BOX 9146, SAN JUAN PR 00908-0146

Lcda. Arleen Y. Pabon Cruz
 Cond Le Mans
 602 Ave Munoz Rivera Oficina 501
 San Juan, PR 00918-3625

(p)DE DIEGO LAW OFFICE PSC
 ATTN ORIENTAL BANK-AUTOS
 P O BOX 79552
 CAROLINA PR 00984-9552

Oriental Bank
 PO Box 195115
 San Juan, PR 00919-5115

(p)PORTFOLIO RECOVERY ASSOCIATES LLC
 PO BOX 41067
 NORFOLK VA 23541-1067

Syncb/Jc Penney Pr
 PO Box 965007
 Orlando, FL 32896-5007

Syncb/Sams Club
 PO Box 965005
 Orlando, FL 32896-5005

Syncb/Walmart
 PO Box 31293
 Salt Lake City, UT 84131-0293

Syncb/empresas Berrios
 C/o
 PO Box 965036
 Orlando, FL 32896-5036

Syncb/netwrk
 C/o
 PO Box 965036
 Orlando, FL 32896-5036

Syncb/pandora
 C/o
 PO Box 965036
 Orlando, FL 32896-5036

Syncb/tjx Cos Dc
 PO Box 71737
 Philadelphia, PA 19176-1737

Thd/Cbna
 PO Box 6497
 Sioux Falls, SD 57117-6497

JUAN CARLOS COLON RIVERA
 BONNEVILLE HEIGHTS E12 AGUADA STREET
 CAGUAS, PR 00725

MONSITA LECAROZ ARRIBAS
 OFFICE OF THE US TRUSTEE (UST)
 OCHOA BUILDING
 500 TANCA STREET SUITE 301
 SAN JUAN, PR 00901

NOREEN WISCOVITCH RENTAS
 Noreen Wiscovitch Rentas, Ch 7 Trustee
 P.O. Box 364363
 San Juan, PR 00936-4363

ROBERTO FIGUEROA CARRASQUILLO
 PO BOX 186
 CAGUAS, PR 00726-0186

The preferred mailing address (p) above has been substituted for the following entity/entities as so specified by said entity/entities in a Notice of Address filed pursuant to 11 U.S.C. 342(f) and Fed.R.Bank.P. 2002 (g)(4).

AEELA
PO Box 364508
San Juan, PR 00936-4508

DTOP
PO Box 41269
San Juan, PR 00940-1269

ORIENTAL BANK-AUTOS
PO BOX 79552
CAROLINA, PR 00984-9552

Portfolio Recovery Associates, LLC
PO Box 12914
Norfolk, VA 23541-0914

End of Label Matrix	
Mailable recipients	25
Bypassed recipients	0
Total	25